UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

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REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 12/21/05 2 Serial/Patent # 10/071,877						
3 Please refund the following fee(s):		4 PAI NUM	ER BER	5 DATE FILED	6 AMOUNT	
	Filing				\$	
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X	No Fee Due (Explanation):	<u> </u>				
The application is not abandoned.						
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11 RE	FUND REQUESTED BY: C.T. Donnell					
TYPED/PRINTED NAME: CT. Donnell TITLE: Pet Offy						
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PTO/SB/64 (05-03) Approved for use through 04/30/2003. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE rwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR REVIVAL OF AN APPLICATION FOR PATENT UNINTENTIONALLY UNDER 37 CFR 1.137(b)	Docket Number (Options 36-001810US	al)		
First named inventor: Robert C. Downs				
Application No.: 10/071,877	Art Unit: 1743			
Filed: February 8, 2002	Examiner: Brian J. Sines			
Title: AUTOMATED CENTRIFUGE AND METHOD OF USING SA	ME			
Attention: Office of Petitions Mail Stop Petition Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 FAX: (703) 308-6916				
NOTE: If information or assistance is needed in completing this Information at (703) 305-9282.	form, please con	tact Petitions		
The above-identified application became abandoned for failure to file a tinotice or action by the United States Patent and Trademark Office. The despiration date of the period set for reply in the Office notice or action plu actually obtained.	ate of abandonm	ent is the day after the		
APPLICANT HEREBY PETITIONS FOR REVIVAL OF	THIS APPLICATI	ON		
NOTE: A grantable petition requires the following items: (1) Petition fee; (2) Reply and/or issue fee; (3) Terminal disclaimer with disclaimer feerequired filled before June 8, 1995; and for all design application (4) Statement that the entire delay was unintentional.		ant applications		
1. Petition fee Small entity-fee \$ 750.00 (37 CFR 1.17(m)). Applicant cla	sims small entity s	tatus. See 37 CFR 1.27.		
Other than small entity - fee \$ 1500.00 (37 CFR 1.17(m))				
2. Reply and/or fee A. The reply and/or fee to the above-noted Office action in the form of	(iden	tify type of reply):		
☐ is enclosed herewith. B. The issue fee of \$ ☐ has been paid previously on				
is enclosed herewith.	 '		LEY	
[Page 1 of 2] its collection of information is required by 37 CFR 1.137. The information is required to obtain		<u> </u>	5 8	

[Page 1 of 2]

This collection of information is required by 37 CFR 1.137. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete this form and or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patients on the amount of time you require to complete the form, call 1-800-PTO-9189 and select option 2.

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